Atty. Dkt. No. 078728-0106

FEB 1 8 2004 Applicant:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Joseph ROBERTS et al.

Title:

CLONING, OVEREXPRESSION AND THERAPEUTIC USE OF BIOACTIVE HISTIDINE AMMONIA LYASE

Appl. No.:

09/833,745

Appl. Filing Date:

4/13/2001

Examiner:

Patterson, Charles L. Jr.

Art Unit:

1652

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

- 1. Submission required under 37 C.F.R. §1.114: (check items that apply)
 - a. Previously submitted:
 - [X] Please enter and consider the amendment/reply previously filed on January 20, 2004.
 - [] Please consider the Affidavit(s)/Declaration(s) previously filed on __ but not considered.
 - [] Please consider the arguments in the Appeal Brief or Reply Brief under 37 C.F.R. § 1.116 previously filed on ___.

02/19/2004 SSITHIB1 00000139 09833745

01 FC:1801 02 FC:1253 770.00 OP

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| [] | Other | | | | | | |
|------------------|---|--|--|--|--|--|--|
| b. Enclosed are: | | | | | | | |
| [] | Amendment/Reply. | | | | | | |
| [] | Affidavit(s)/Declaration(s). | | | | | | |
| [] | Information Disclosure Statement. | | | | | | |
| [] | Form PTO-1449 with copies of listed reference(s). | | | | | | |
| [] | Other. | | | | | | |

Miscellaneous:

[] Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of __ months.

The filing fee is calculated below:

| | Claims as Amended | | Previously Paid For | 7 | Extra Claims Present | | Rate | | Fee Totals |
|------------------|----------------------|--------|------------------------|-----|-------------------------|-----|----------|---|------------|
| RCE Fee 1.17(e): | | | | | | | \$770.00 | = | \$770.00 |
| Total Claims: | 14 | - | 24 | = | 0 | x | \$18.00 | = | \$0.00 |
| Independents | 4 | - | 5 | = | 0 | x | \$86.00 | = | \$0.00 |
| First p | resentation o | of any | Multiple | Dep | endent Claims: | + | \$290.00 | = | \$0.00 |
| | | | | | CLAIMS | FEE | TOTAL: | | \$770.00 |

[X] Applicants hereby petition for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

| [] Extension for response filed within the first month: | \$110.00 | 0 \$0.00 | | | | |
|---|------------|-----------|--|--|--|--|
| [] Extension for response filed within the second month: | \$420.00 | \$0.00 | | | | |
| [X] Extension for response filed within the third month: | \$950.00 | \$950.00 | | | | |
| [] Extension for response filed within the fourth month: | \$1,480.00 | \$0.00 | | | | |
| [] Extension for response filed within the fifth month: | \$2,010.00 | \$0.00 | | | | |
| EXTENSION FEE SUBTOTAL: | | | | | | |
| EXTENSION FEE ALREADY PAID: - | | | | | | |
| EXTENSION FEE TOTAL | | | | | | |
| CLAIMS AND EXTENSION FEE TOTAL: | | | | | | |
| [] Small Entity Fees Apply (subtract ½ of | \$0.00 | | | | | |
| [] Suspension of action requested under 37 C.F.R. | § 1.103(c) | \$0.00 | | | | |
| TO | ΓAL FEE: | \$1300.00 | | | | |

- A check in the amount of \$1300.00 to cover the filing fee and third-month extension [X]of time fee is enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be [X] required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

FOLEY & LARDNER

Customer Number: 22428

(202) 672-5404 Telephone: Facsimile:

(202) 672-5399

Stephen A. Bent Attorney for Applicant

Registration No. 29,768